

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005196

FILED
Apr 14, 2005
Secretary of State

Entity Name: INLET COURT, JUPITER HEIGHTS, DOCK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3434 INLET CT
JUPITER, FL 33469 US

New Principal Place of Business:

Current Mailing Address:

3434 INLET CT
JUPITER, FL 33469 US

New Mailing Address:

FEI Number: 59-3353111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRYE, KIMBERLY
3434 INLET CT
JUPITER, FL 33469 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRYE, KIMBERLY
Address: 3434 INLET CT
City-St-Zip: JUPITER, FL 33469 US

Title: V () Delete
Name: FAULCONER, CHARLES
Address: 3462 INLET CT
City-St-Zip: JUPITER, FL 33469 US

Title: D () Delete
Name: GREGG, DOUGLAS
Address: 3424 INLET CT
City-St-Zip: JUPITER, FL 33469 US

Title: SD () Delete
Name: FAULCONER, KATRINA
Address: 3462 INLET CT
City-St-Zip: JUPITER, FL 33469 US

Title: D () Delete
Name: SPAULDING, JOHN
Address: 3453 INLET CT
City-St-Zip: JUPITER, FL 33469 US

Title: D () Delete
Name: SPAULDING, LAURA
Address: 3453 INLET CT
City-St-Zip: JUPITER, FL 33469 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATRINA FAULCONER

SD

04/14/2005

Electronic Signature of Signing Officer or Director

Date